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FEC FORM 3X

Only

REPORT OF RECEIPTS **AND DISBURSEMENTS**For Other Than An Authorized Committee

RECEIVED TECHNER

2016 JUL 13 AM 9: 02

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NAME OF COMMITTEE (in full)		TYPE OR PRINT ▼		Example: If typing, type over the lines.		E4M5		
A,M,E,R,I,C,A,N,,M,U,S,L,I,M,S,,A,G,A,I,N,S,T,,T,R,U,M,P,,P,A,C,,,,,,,,,,,,,,,,,,								
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5	Check if different than previously reported. (ACC)	SIULITIEL L	A ₁ 1 ₁ 5 ₁ 0 ₁ 1					لـــا
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2.	FEC IDENTIFICATION N	JMBER ▼	CITY ▲	·	STATE A	· Z	ZIP CODE A	
	C 0 0 6 1 8 6	2,9	3. IS THIS REPORT	NEW (N)	or 🔲	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20	(M5)	Aug 20 (M8)	Nov 20 (Non-Ele Year On	
	(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20	(M6)	Sep 20 (M9)		0 (M12) ection
	April 15		Apr 20 (M4)	Jul 20	(M7)	Oct 20 (M10)		1 (YE)
	Quarterly Report (0	(c) 12-Day		Primary (12P)	☐ Ge	neral (12G)	Runoff	(12R)
	July 15 Quarterly Report (0	(22) PRE-Elect Report for	7	Convention (12C)	Sp.	ecial (12S)		
	Quarterly Report (0	Q3)		M T M 7 / 10 T 0		₹	in the	
	January 31 Year-End Report (/E)	Election on				State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Ele Report fo		General (30G)	Ru	noff (30R)	Specia	al (30S)
	Termination Report (TER)		Election on	M * M / D * 6		Y Y Y	in the State of	
5. Covering Period 0 4 0 1 2 0 1 6 through 0 6 3 0 2 0 1 6								
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.								
Тур	oe or Print Name of Treasure	er KHAWAR S.	HASSAN					<u></u>
Signature of Treasurer Date Date Date Date								
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.								
	Office Use						FORM 3) ev. 12/2004	<u> </u>